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## REQUEST FORM FOR APPLICATION UNDER 37 CFR 1.53(b)

RECEIPT NUMBER: 4590-059A  
Prior Application: 09/692,295  
Art Unit: 3661  
Examiner: Nguyen Thu V.

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This is a Request for filing a Continuation, application under 37 CFR 1.53(b) of pending prior U.S. Patent Application No. 09/692,295 filed on October 19, 2000, entitled PORTABLE VEHICLE NAVIGATION SYSTEM, by the following named inventor(s) Larry E. SPENCER, Mike MOUSER, Jeffrey A. MILLINGTON, Roger A. STEVENS; Christopher J. Hook:

1.  I hereby state that the enclosed copy of this prior application is a true copy of the above-identified prior application.
2. Oath or Declaration
  - a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 CFR 1.63(d))
    - i.  Deletion of inventor(s)  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
3.  Incorporation By Reference (useable if Box 2b is checked)  
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 2b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
4.  Preliminary Amendment is enclosed.
5.  An Information Disclosure Statement and PTO1449 Form are submitted herewith.
6.  Cancel claims

7a. The filing fee is calculated on the basis of the claims existing in the prior application as amended at 4 and 6 above:

	NO. OF CLAIMS		EXTRA CLAIMS	RATE	FEE
Total Claims	39	MINUS 20	19	x \$18 =	\$0.00
Independent Claims	6	MINUS 3	3	x \$84 =	\$0.00
Basic Application Fee					\$770.00
If multiple dependent claims are presented, add \$280.00					\$ 0.00
Total Application Fee					\$ .00
Subtract 1/2 if small entity					
<b>TOTAL APPLICATION FEE DUE</b>					<b>\$ 770.00</b>
<input checked="" type="checkbox"/> CREDIT CARD AUTH. FORM <input type="checkbox"/> CHECK <input checked="" type="checkbox"/> CHARGED TO DEPOSIT ACCOUNT NO. 07-1337					

7b.  Applicant is entitled to small entity status under 37 CFR 1.9 and 37 CFR 1.27.

8.  The Commissioner is hereby authorized to charge fees under 37 CFR 1.16 and 1.17 which may be required, including any extension of time fees to maintain the pendency of the parent application No. 09/427,705 or credit any overpayment to Deposit Account No. 07-1337.

9.  Amend the specification by inserting before the first line the sentence:  
-- The present Application is a Continuation of Application Serial No. 09/692,295, filed on October 19, 2000, which in turn corresponds to U.S. Provisional Application No. 60/160,274 filed on October 19, 1999, and priority is hereby claimed under 35 USC §119 and 35 USC §120 based on these applications.

10.  This application claims priority of U.S. Application Serial No. 09/692,295, filed on October 19, 2000 and U.S. Provisional Application No. 60/160,274 filed on October 19, 1999

11.  The prior application is assigned of record to Magellan DIS, Inc.

12.  The power of attorney in the prior application is to:  
LOWE HAUPTMAN GILMAN & BERNER LLP.

13.  Also enclosed:  
5 pages of drawings.

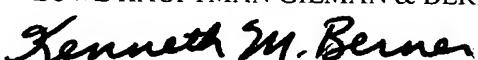
14.  A petition, fee and response has been filed to extend the term in the pending prior application until

Address all future communications to: (May only be completed by applicant, or attorney or agent of record)

LOWE HAUPTMAN GILMAN & BERNER, LLP  
1700 Diagonal Road, Suite 300  
Alexandria, Virginia 22314

Respectfully submitted,

LOWE HAUPTMAN GILMAN & BERNER, LLP



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KMB/iyr  
Date: March 30, 2004

**PATENT****LOWE HAUPTMAN GILMAN & BERNER, LLP**Docket No. 11596-059 Serial No. 09/962,295 Patent No. \_\_\_\_\_Date Filed/Issued: 10/15/03Applicant(s) SPENCER COFFEE**The Stamp of the U.S. Patent & Trademark Office acknowledges receipt of the following:**

<input type="checkbox"/> Acknowledgement, Req.	<input type="checkbox"/> No Fee	<input type="checkbox"/> IDS/Form 1449/Ref(s)	<input type="checkbox"/> \$ _____
<input type="checkbox"/> Amendment/Response	<input type="checkbox"/> \$ _____	<input type="checkbox"/> Issue Fee	<input type="checkbox"/> \$ _____
<input type="checkbox"/> Amendment After Final	<input type="checkbox"/> \$ _____	<input type="checkbox"/> Maintenance Fee	<input type="checkbox"/> \$ _____
<input type="checkbox"/> Appeal Brief (in Triplicate)	<input type="checkbox"/> \$ _____	<input type="checkbox"/> Missing Parts, Resp w/Dec.	<input type="checkbox"/> \$ _____
<input type="checkbox"/> Assignment	<input type="checkbox"/> \$ _____	<input type="checkbox"/> Notice of Appeal	<input type="checkbox"/> \$ _____
<input type="checkbox"/> Certificate of Correction	<input type="checkbox"/> \$ _____	<input type="checkbox"/> Oral Hearing, Req.	<input type="checkbox"/> \$ _____
<input type="checkbox"/> Change of Address	<input type="checkbox"/> No Fee	<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> No Fee
<input type="checkbox"/> Claim of Priority	<input type="checkbox"/> No Fee	<input type="checkbox"/> Priority Document(s)	<input type="checkbox"/> No Fee
<input type="checkbox"/> Corr. Not. of Recordation, Req.	<input type="checkbox"/> \$ _____	<input type="checkbox"/> Refund, Req.	<input type="checkbox"/> \$ _____
<input type="checkbox"/> Declaration, Subst/Supp	<input type="checkbox"/> No Fee	<input type="checkbox"/> Reply Brief (in Triplicate)	<input type="checkbox"/> No Fee
<input type="checkbox"/> Drawing Revision, Req.	<input type="checkbox"/> No Fee	<input type="checkbox"/> Restriction/Election Response	<input type="checkbox"/> No Fee
<input type="checkbox"/> Extension of Time, Petition	<input type="checkbox"/> \$ _____	<input type="checkbox"/> <input checked="" type="checkbox"/> Revoke Pwr Atty/New Appt.	<input type="checkbox"/> No Fee
<input type="checkbox"/> Filing Rpt, Req for Corr	<input type="checkbox"/> \$ _____	<input type="checkbox"/> Status Inquiry	<input type="checkbox"/> No Fee
<input type="checkbox"/> Formal Dwg(s) (# of Shs) _____	<input type="checkbox"/> No Fee	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> \$ _____
<input type="checkbox"/> CPA, Req. for (1.53(d) of S.N.)	<input type="checkbox"/> _____	<input type="checkbox"/> filed	<input type="checkbox"/> _____
<input type="checkbox"/> Other	<input type="checkbox"/> _____	<input type="checkbox"/> Chrg to Dep. Acct. No.	<input type="checkbox"/> _____
<input type="checkbox"/> Check No. _____	<input type="checkbox"/> _____	<input type="checkbox"/> Credit card authorization form	<input type="checkbox"/> Amount \$ _____
		<input type="checkbox"/> Filed by:	<u>SPENCER COFFEE</u> Date: <u>4/17/03</u>

